PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

| INSTRUCTIONS This for appropriate. All facility or indicated unless corrected to maintenance fee notification | m should be used for tran the bondence including the later of the late | smitting the ISSU Patent, advance or in Block 1, by (a | E FEE and ders and not) specifying | PUBLIC ification a new co | ATION FEE (if requ of maintenance fees v orrespondence address | ired). Blocks 1 through 5 will be mailed to the curre and/or (b) indicating a second | should be completed where nt correspondence address as parate "FEE ADDRESS" for |
|--|---|--|---|--|--|--|---|
| CURRENT CORRESPONDENC | any change of address) | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | | |
| Michael R. Kraw: Fulbright & Jawors Suite 2400 600 Congress Aver | | | | Ce | rtificate of Mailing or Tra his Fee(s) Transmittal is be with sufficient postage for 1 Stop ISSUE FEE addre TO (571) 273-2885, on th | insmission ing deposited with the United first class mail in an envelope ss above, or being facsimile e date indicated below. | |
| 4/26/2006 RHEBRAH 1870000 | | | | Michael | 1. Kunush | (Signature) | |
| 1 FC:2501 2 FC:1504 | 700.00 BP 300.00 BP | | | | APRIL 21 | , 2006 | (Date) |
| 3 PC: 804 LICATION NO. | FILING DATE | FIRST NAMED | | D INVEN | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/671,340 | 10/671,340 09/25/2003 | | Denis Gravel | | | GOUD:038US | 4251 |
| TITLE OF INVENTION: M | | | | | , | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PU | BLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | YES | \$700 | | | \$300 | \$1000 | 04/24/2006 |
| EXAM | EXAMINER | | ART UNIT | | ASS-SUBCLASS |] | |
| RUSSEL, J | RUSSEL, JEFFREY E | | 1654 | | 514-012000 | | |
| Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. | ation form e of a Customer | Customer Cus | | | | | |
| 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI | an assignee is identified be 37 CFR 3.11. Completion of | clow, no assignee of this form is NO | data will app \(\text{a substitute} \) \(\text{RESIDENCE} \) | pear on the for filing | ne patent. If an assign g an assignment. Y and STATE OR CO | UNTRY) | document has been filed for |
| SAINT-LAURENT, QUEBEC, CANADA THERATECHNOLOGIES INC. | | | | | | | |
| | | | inted on the p | oatent): | ☐ Individual 🏿 🖔 | orporation or other private | group entity Government |
| 4a. The following fee(s) are enclosed: \$1009.00 Z Issue Fee \$700 X Publication Fee (No small entity discount permitted) \$300 X Advance Order - # of Copies 3 x \$3 = \$9.00 X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 - 1212 (enclose an extra copy of this form). | | | | | | | |
| 5. Change in Entity Status a. Applicant claims SI | (from status indicated above MALL ENTITY status. See |) | _ | 11 | cneck is | MISSING OF LL ENTITY status. See 37 | insulticient |
| The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco | is requested to apply the Issu ublication Fee (if required) vords of the United States Pate | ie Fee and Publicat vill not be accepted ent and Trademark | ion Fee (if ar I from anyone Office. | ny) or to i | re-apply any previousl an the applicant; a reg | y paid issue fee to the appli stered attorney or agent; or | cation identified above, the assignee or other party in |
| Authorized Signature | Michael 1 | Kapun | <u> </u> | - | Date AP | RIL 21, 2006 | 5 |
| Typed or printed name MTCHAEL R. KRAWZSENEK Registration No. 51,898 | | | | | | | |
| This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi | in is required by 37 CFR 1.3 ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, st mia 22313-1450. DO NOT | 11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR C | n is required 1.14. This col depending up Chief Inforr COMPLETED | to obtain llection is pon the in mation O D FORM | or retain a benefit by to sestimated to take 12 individual case. Any conficer, U.S. Patent and S TO THIS ADDRESS | he public which is to file (a minutes to complete, include mments on the amount of Trademark Office, U.S. Do S. SEND TO: Commissione | nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.